

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09781326 FILING DATE 02-13-01

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1				
2	1			
3	1			
4	1			
5	1			
6	1			
7	1			
8	1			
9	1			
10	1			
11	1			
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50				
TOTAL IND.	3			
TOTAL DEP.	6	↓	↓	↓
TOTAL CLAIMS	14			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
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TOTAL IND.								
TOTAL DEP.		↓	↓	↓	↓	↓	↓	↓
TOTAL CLAIMS								

Best Available Copy